

BEST AVAILABLE COPY

POSITION	INITIALS	ID NO.	DATE
<b>FEES DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>	<i>MT</i>		<i>3/3/98</i>
<b>FORMALITY REVIEW</b>	<i>RA</i>	<i>9162</i>	<i>4/6/98</i>

*414***INDEX OF CLAIMS**

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral) Canceled A ..... Appeal  
 ÷ ..... Restricted 0 ..... Objected

Claim	Date									
Final	10	02	06	01	10	03				
Original	5	25	29	04	31	11				
98	99	00	00	00	02	03				
10	00	00	00	00	00	00				
11	00	00	00	00	00	00				
12	00	00	00	00	00	00				
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48	00	00	00	00	00	00				
49	00	00	00	00	00	00				
50	00	00	00	00	00	00				

If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE)